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For Use by Members, Officers, and Employees Form A MAY 1 4 2014

2013 FINANCIAL DISCLOSURE STATEMENT

UNITED STATES HOUSE OF REPRESENTATIVES

LEGISLATIVE RESOURCE CENTER

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Name:	Wicheel H. Collans	Daytime Telephone:_	2014 MAY 20 AM 11: 46 OFFICE OF THE CLERK U.S. HOUSE OF THE BENEARBYES
FILER	Member of or Candidate for State:	Officer or Employing Office:	ploying Office:
REPORT TYPE	2013 Annual (Due: May 15, 2014)	Amendment	Termination Date:

PRELIMINARY INFORMATION - ANSWER EACH OF THESE QUESTIONS

	Yes Yes Yes X	F. Did you have any reportable agreement or arrangement with an outside entity during the reporting period or in the current calendar year up through the date of filing? G. Did you, your spouse, or your dependent child receive any reportable gift(s) totaling more than \$350 in value from a single source during the reporting period? H. Did you, your spouse, or your dependent child receive any reportable travel or reimbursements for travel totaling more than \$350 in value from a single source during the reporting period? I. Did any individual or organization make a donation to charity in	
D. Did you, your spouse, or your dependent child have any reportable fiability (more than \$10,000) at any point during the reporting period? E. Did you hold any reportable positions during the reporting period or in the current calendar year up through the date of filing?	Yes You	I. Did any individual or organization make a donation to charity in lieu of paying you for a speech, appearance, or article during the reporting period? ATTACH THE CORRESPONDING SCHEDULE IF YOU ANSWER "YES"	Yes No No YOU ANSWER "YES"

IPO, EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION - ANSWER EACH OF THESE QUESTIONS

EXEMPTION – Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child because they meet all three Yes No X	EXEMPTION – Have you tests for exemption? Do
TRUSTS – Details regarding "Qualified Blind Trusts" approved by the Committee on Ethics and certain other "excepted trusts" need not be disclosed. Have you excluded from Yes Web No	TRUSTS – Details regar this report details of such
IPO - Did you purchase any shares that were allocated as a part of an Initial Public Offering during the reporting period? If you answered "yes" to this question, please contact Yes No X	IPO - Did you purchase the Committee on Ethics

SCHEDULE A - ASSETS & "UNEARNED INCOME"

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7	+77000	6	L'IL	Acco Cas	Adventage	ABC Hedge Fund	Simon & Schuster	Mega Corp. Stock	dependent child (DC), or jointly held with anyone (JT), in the optional column on the far left. For a detailed discussion of Schedule A requirements, please refer to the instruction booklet.	If you have a privately-traded fund that is an Excepted investment Fund, please check the 'Eir' box. The you so choose, you may indicate that an asset or the your secure (CD), or the your secure	Exclude: Your personal residence, including second homes and vacation homes (unless there was tental income during the reporting period); and any financial interest in, or income denved from a federal retirement program, including the Thrift Savings Plan.	For an ownership interest in a privately-held business that is not publicly traded, state the name of the business, the nature of its activities, and its geographic location in Block A.	For rental and other real property held for investment, provide a complete address or description, e.g., rental property: and a city and state.	For bank and other cash accounts, total the amount in all interest-bearing accounts. If the total is over \$5,000, list every financial institution where there is more than \$1,000 in interest bearing accounts.	(do not use only toker symbols). For all IRAs and other retirement plans (such as 401(k) plans) provide the value for each asset held in the account that exceeds the reporting thresholds.	production of income and with a fair market value exceeding \$1,000 at the end of the reporting period, and (b) any other reportable asset or source of income that generated more than \$200 in 'unearned' income during the year. Provide complete names of stocks and mutual funds	Asset and/or income source Identify (a) each asset held for investment or	BLOCK A
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									\$141,000					(3)		valuation used. If an ass because *Column you have	čale e	
							indefinite		\$1,001-\$15,000					ဂ	1	valuation method oth used. If an asset was solibecause it generated "Column M is for ass you have no interest.	value -	١
) *;							nite		515/001 -07 0,000		1.0	C 42.79		b	1000 PC 400 PC	valuation method other than fair market value, please specify the method used. I asset was sold during the reporting period and is included only because it generated income, the value should be "None." *Column M is for assets held by your spouse or dependent child in which you have no interest.	of asset at	
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						×			\$250,001-\$500,000					റ	1	narket v reporti value s our spor	t close of the repor	BLOCK B
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									Grant etc. (214 (ABS Spouse/DC Asset ov	er \$1,000,000*			111			the method duded only	you use a	
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			38.08					×	DIVIDENDS							rate tax. account n. Di if rein ssets h asset o	조 유 오	
									INTEREST							defeme (s), you widend wested, eld in t	olumns	į
									EXCEPTED/BLIND	TRUST						generate tax-deferred income (such as 401(k), IrA, or 529 accounts), you may check the "rax-Deferred column. Dividends, Interest, and capital gains, even if reinvested, must be disclosed as Income for assets held in taxable accounts. Check "None" if the asset generated no income during the reporting period.	Check all columns that apply. For accounts that	BLOCK C
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						Partnership	Royalles		Other Type of incom (Specify, e.g., Partne		arm Income)					"Tax-Deferred" "Tax-Deferred" capital gains, sed as income Check "None Check "None ing the reporting	raccoun	
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									\$1,000,001-\$5,000,					,	4	may check rife worte columns, roy all other assets induced to category of income by checking the appropriate box below. Dividends, interest, and capital gains, even if reinvested, must be disclosed as income for assets held in taxable accounts. Check "None" if no income was earned or generated.	For assets for which you checked "Tax-Deferred" in Block C, you	ชื่
									Caver 185,690 ,896 Spouse/DC Asset w	rith Income over \$	1,000,000*			. <u>2</u>	<u> </u>		lack C, you	
								Spary	P. S. S					blank if no trans that exc \$1,000.	an as pleas follow		=	Tra E
									S, S(part). or E					Leave this column blank if there are no transactions that exceeded \$1,000.	if only a portion of an asset was sold, please indicate as follows: (S (part)).	purchases (P), sales (S), or exchanges (E) exceeding \$1,000 in the reporting period.	Indicate if the	BLOCK E
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			Laves I ment Final	Continued.	R Co	The Class	In ussco Charter	12 23 13 15 A	(Took & Took	() 65 (30000	Franklin Watroll	ASSET NAME		Asset and/or income Source	BLOCK A
						义								None >- #34.004 \$1,001-\$15,000		
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														Spouse/DC Asset over \$1,000,000*		
														INTEREST CUTTAL CARR EXCEPTED/BLIND TRUST	Type of Incom	BLOCK C
						S		* 335.50						Cither Type of Income (Specify' e.g., Partnership Income or Farm Income)	ncome	X O
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			- Address of the second		A CONTRACTOR OF THE CONTRACTOR		T. Liverson,		min additional and a second and					Spouse/DC Asset with income over \$1,000,000'	Transaction	BLOCK E

SCHEDULE A - ASSETS & "UNEARNED INCOME" Page 3

SCHEDULE B - TRANSACTIONS

Page U

										,	Town P Fixed	TO GOWINA SCITT	SP Example Mega Corp. Stock	SP. DC, JT Asset	Capital Gains: If a sales transaction resulted in a capital gain in excess of \$200, check the Capital gains' box, unless it was an asset in a tax-deferred account, and disclose the capital gain income on Schedule A. **Column K is for assets solely held by your spouse or dependent child	purchase or sale of your personal residence, unless it generated rental income. If only a portion of an asset is sold, please choose 'partial sale' as the type of transaction.	dependent child for investment or the production of income include transactions that resulted in a capital loss. Provide a brief description of an exchange transaction that exclude transactions between your course or dependent children or the exclude transactions between your course or dependent children or the	Report any purchase, sale, or exchange transactions that exceeded \$1,000 in the
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															Ower BK (1980) (Propagation)	60°		

SCHEDULE C - EARNED INCOME

the filer's current employment by the U.S. governmen	Name:	
the filer's current employment by the U.S. government) totaling \$200 or more during the reporting period. For a spouse, lis	" lychal H Collacan	
reporting period.	Page_S o	
For a spouse, lis		

the s	List the source, type, and amount of earned income from any source (other than the filer's current employment by the U.S. governme	
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the source and amount of any honoraria; list only the source for other spouse earned income exceeding \$1,000. See examples below	filer	
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EXCLUDE: Military pay (such as National Guard or Reserve pay), federal retirement programs, and benefits received under the Social Security Act.

						State of /slored	Colorado Public Exployees Petirement Hosa	EXAITIDIES. Civil War Roundtable (Oct. 2) Ontario Countly Board of Education	Keene State State of Maryland	Source (include date of receipt for honoraria)	INCOME LIMITS and PROHIBITED INCOME: The 2013 limit on outside earned income for Members and employees compensated at or above the "senior staff" rate was \$26,955. In addition, certain types of income (notably honoraria, director's fees, and payments for professional services involving a fiduciary relationship) were totally prohibited.
						Sporis Shr	Persion	Spouse Speech Spouse Salary	Approved Teaching Fee Legislative Pension	Туре	ensated at or above the "senior staff" ra
					3	\$131 121	\$ 57 724	\$1,000 N/A	\$6,000 \$18,000	Amount	ite was \$26,955. In addition, certain

SCHEDULE D - LIABILITIES

Name: Page_ O of

Report liabilities of over \$10,000 owed to any one creditor at any time during the reporting period by you, your spouse, or your dependent child. Mark the highest amount owed during the reporting period. Members: Members are required to report all liabilities secured by real property including mortgages on their personal residence. Exclude: Any mortgage on your personal residence (unless you rent it out or are a Member); loans secured by automobiles, household furniture, or appliances; liabilities of a business in which you own an interest (unless you are personally liable); and liabilities owed to you by a spouse or the child, parent, or sibling of you or your spouse. Report a revolving charge account (i.e., credit card) only if the balance at the close of reporting period exceeded \$10,000.
*Column K is for liabilities held solely by your spouse or dependent child.

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	Jun/10	ď	Whote	86/9	Date Liability Incurred MO/YR	3
	2 D Marteta	1025 lon la SA Do 10	1st had to	Mortgage on Rental Property, Dover, DE	Type of Liability	
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					Over \$50,000,000	
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SCHEDULE E - POSITIONS

Report all positions, compensated or uncompensated, held during the current or prior calendar year as an officer, director, trustee of an organization, partner, proprietor, representative, employee, or consultant of any corporation, firm, partnership, or other business enterprise, nonprofit organization, labor organization, or educational or other institution other than the United States. Exclude: Positions listed in Schedule Constitions held in any religious social fraternal or political entities found in any religious social fraternal or political entities and campaign organizations); and positions solely of an honorary nature.

listed in Schedule C; positions held in any religious, social, fra	listed in Schedule C; positions held in any religious, social, fraternal, or political entities (such as political parties and campaign organizations); and positions solely of an norionally nature.
Position	Name of Organization
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And all and any of the control of th	

SCHEDULE F - AGREEMENTS

Name:	
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Page 7 of (

Identify the date, parties to, and general terms of any agreement or arrangement that you have with respect to: future employment; a leave of absence during the period of government service; continuation or deferral of payments by a former or current employer other than the U.S. government; or continuing participation in an employee welfare or benefit plan maintained by a former employer.

_	Date	Parties to Agreement	Terms of Agreement

SCHEDULE G - GIFTS

Report the source (including name, city, and state), a brief description, and the value of all gifts totaling more than \$350 received by you, your spouse, or a dependent child from any source during the year. **Exclude**: Gifts from relatives, gifts of personal hospitality from an individual, local meals, and gifts to a spouse or dependent child that are totally independent of his or her relationship to you. Gifts with a value of \$140 or less need not be added towards the \$350 disclosure threshold. **Note**: The gift rule (House Rule 25, clause 5) prohibits acceptance of gifts except as specifically provided in the

Source	Description	Value
Example: Mr Joseph Smith, Arlington, VA	Silver Platter (determination of personal friendship received from the Ethics Committee)	\$400

SCHEDULE H - TRAVEL PAYMENTS and REIMB

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Identify the source and list travel itinerary, dates, and nature of expenses provided for travel and travel-related expenses totaling more than \$350 received by you, your spouse, or your dependent child during the reporting period. Indicate whether a family member accompanied the traveler at the sponsor's expense. Disclosure is required regardless of whether the expenses were paid directly by the sponsor or were paid by you and reimbursed by the sponsor.

EXCLUDE: Privately-sponsored travel approved by the Ethics Committee, if post-travel disclosure was filed with the Clerk; travel-related expenses provided by federal, state, and local governments, or by a foreign government required to be separately reported under the Foreign Gifts and Decorations Act (FGDA, 5 U.S.C. § 7342); political travel that is required to be reported under the Federal Election Campaign Act; travel provided to a spouse or dependent child that is totally independent of his or her relationship to the filer.

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	Source	Date(s)	City of Departure – Destination –– City of Return	Lodging? (Y/N)	Food? (Y/N)	Family Member Included? (YIN)
	Government of China (MECEA)	Aug. 6-11	DC-Beijing, China - DC	Y	4	z
Examples	Habitet for Humanity (charify fundraiser)	Mar. 3-4	DC-Boston-DC	· ·	Υ	
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SCHEDULE I – PAYMENTS MADE TO CHARITY IN LIEU OF HONORARIA

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separate c	separate confidential list of charities receiving such payments must be filed directly with the Committee on Ethics.	Ethics.		w a visiliable olganization in ted of paying an individualist to you. A
	Source	Activity	Date	Amount
Examples:	Association of American Associations, Washington, DC XYZ Magazine	Speech Article	Feb, 2, 2013 Aug. 13, 2013	\$2,000 \$500
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FILER NOTES (Optional)

Name: Marilmed H. Collaca Page to of to

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